

CITY OF SANTA CLARA BUILDING DIVISION
Permit Center: 408-615-2420, Permitcenter@santaclaraca.go
Inspection: 408-615-2440, Inspection@santaclaraca.gov

BUILDING PERMIT APPLICATION			PERMIT NUMBER:				
JOB SITE ADDRESS		SUITE NO.	APPLICATION DATE:	RECEIVED BY:			
PRIMARY CONTACT (Circle one): Applicant	Owner Contractor	Archit	ect/Engineer	Other(specify)			
APPLICANT: Name							
-							
Address							
PROPERTY OWNER: Name		PHONE	NO				
AddressEMAIL							
CONTRACTOR:							
COMPANY NamePHONE NO							
Address		_ EMAIL					
ARCHITECT/ENGINEER		PHONE N	IO				
NamePHONE I AddressEMAIL _							
TYPE OF PROJECT(circle one) Commercial/Industrial Residential (1&2)	Family) Multi-Family/Mix		PARCEL#		FLOOD ZONE:		
Oommercia/maastriai (142							
VALUATION (cost of all labor and materials)	Existing SQ FT		New SQ FT	For office Use (Only		
				PLAN REVIEW	PLAN REVIEW FEES		
2 nd Story Addition?	Remodel SQ FT	Number of	of Stories	FIRE			
Yes No	Nomodel 54 1 1	Number	or Otorics	BLDG			
Construction Type	Existing Occupancy	Proposed	l Occupancy	2%			
				TECHNOLOGY PERMIT FEES			
Number of Residential Units	Tract Number	Fire Sprin	nklers?	BUILDING			
Complemental Information Possible I		Ye	s No	SEISMIC			
 Supplemental Information Required: A Copy of the Planning Approval or meetin plans for Building review. 	g with Planning must be subm	nitted prior to	submission of	BLD STD			
 Demolition permits must be issued for exis construction at the same location. 	ting buildings before issuance	of a building	permit for new	' IMAGING			
Hazardous Materials Management Plans/E hazardous materials above threshold quan							
25507: 500 pounds or more for solids, 55 compressed gases.	PLUMBING						
NOTES (For SWine Hay Suits)				MECHANICAL			
NOTES (For Office Use Only)				BPAP			
	2% TECHNOLOGY						
				TOTAL			
IND DGSEINALSEOPMSVnformational/GA26a Parmit Application front/Lback, 10-2018, doc				i			

EMAIL	PHONE		DATE	!					
			PRINT NAME						
	s application and state that the aborelating to building construction, an ection purposes.					e			
I hereby affirm, under the per person in any manner so as making the Certificate of Ex- forthwith comply with such p	FION FROM WORKER'S COMPE enalty of perjury, that in the perform to become subject to the worker's emption, you should become subject provisions or this permit shall be re	mance of the work for s compensation provi- ect to the Worker's Co evoked.	which this permit sions of Sec. 3700 ompensation provi	of the Labor Code. sions of the Labor C	**NOTE: i ode, you	if, after			
SIGNATURE OF PERMIT H	HOLDER								
POLICY NO.	POLICY NO CARRIER								
☐ I have and will maintain Worker's Compensation Insurance, as required by Sec. 3700 of the Labor Code, for the performance of the work for which this permit is issued.									
☐ I have and will maintain a Certificate of Consent to self-insure for Worker's Compensation, as provided for by Sec. 3700 of the Labor Code, for the performance of the work for which this permit is issued.									
WORKER'S COMPENSATI	ON DECLARATION	FRINI		DATE					
SIGNATURE OF OWNER	c. 7044, B & P. C for this reason:_	PRINT		DATE					
Professions Code stat who contracts for such	perty, am exclusively contracting wes: The Contractor's License Law a projects with contractors licensed	does not apply to an d pursuant to the Con	owner of property tractor's License L	who builds or improaw.					
intended or offered for of property who builds improvements are not	property, or my employees with war sale. Sec. 7044, Business and Pr or improves thereon, and who do intended or offered for sale. If, how the burden of proving that he did	rofessions Code state es such work himself wever, the building or	es: Contractor's Lic or through his own r improvement is s	ense Law does not a n employees, provide old within one year o	apply to a ed that su	n owner ch			
(B&P.C.) states that any city applicant for such permit to commencing with Sec. 7000	empt from the Contractor's License or or county which requires a permifile a signed statement that he is lident Doof Division 3 of the B&P.C.) or the pany applicant for a permit subjects	it to construct, alter, in icensed pursuant to the nat he is exempt there	mprove, demolish on the provision of the errom and the basis	or repair any structur Contractor's Licens s for the alleged exe	e, require e Law (Ch mption. A	es the n. 9- ny			
BUSINESS LICENSE NO_		EXPIRATIO	ON DATE						
SIGNATURE OF CONTRAC	CTOR OR AGENT								
NAME	LICENSE CLASS LICENSE NO. EXPIRES								
	nsed under provisions of Chapter icense is in full force and effect.	9 (commencing with	Section 7000) of D	Division 3 of the Busin	ness and				
LICENSED CONTRACTOR	L S DECLARATION			BLDG ELEC	PLDG	MECH			
PERMIT NUMBER	ADDRESS		ISSUE DATE	PERMIT VALIDATION TYPE BLDG ELEC PLBG MECH					
Permit Cente	CITY OF SANTA (r: 408-615-2420, Permitcenter@sa			-2440, Inspection@s	santaclara	ica.gov			